	<u> </u>
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Anach this card to the back of the mailpiece, 	A. Received by (Please Print Clearly) B. Pale of Delivery C. Signature X MV 1
or on the front if space permits.	D. Is delivery address different from item 1? Yes
1. Article Addressed to: 12-10-02	If YES, enter delivery address below:
* 01-348	
Barry D. Wood	
Wood, Maines & Brown 1827 Jefferson Place, N W	
Washington, DC 20036	3 Service Type □ Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ InsuredMail □ C.O.D. 4 Restricted Delivery? (Extra Fee) □ Yes
2 Article Number (CoPY from service label)	
0023 0771 2665	
PS Form 3811, July 1999 Domestic Ref	turn Receipt 102595-00-M-0952
ORDER DATED ORDER	
MAIL	
RETURN RECEI	PT REQUESTED
NAME Barry D. Wood	C. R. R. NO.
Wood, Maines & Brown 1827 Jefferson Place, N.W. Washington, DC 20036 BY U.S. Postal Service	
CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) Article Sent To:	
	s · 37

